PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10815987

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	-THAN
 			(Column 1)		(Column 2)			TYPE		OR	OTHER THA OR SMALL ENTIT	
TOTAL CLAIMS			34					RATE	FEE]	RATE	FEE
F	OR	·	NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
Ţ	OTAL CHARGE	ABLE CLAIMS	34 minus 20=		* 14			X\$ 9=		OR	X\$18=	252
	DEPENDENT (<u> </u>	inus 3 =	*	1		X43=		OR	X86=	86
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	ı	TOTAL		OR	TOTAL	1108
CLAIMS AS AMENDED - PART II								<u> </u>	1	OTHER		
_	(Column 1)			(Colum				SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A		REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا ا	+145=		OR	+290=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colum	.a. 2)	(Column 2)	Α	DDIT. FEE		OR,	ADDIT. FEE	
		CLAIMS	l .	(Colum HIGHE		(Column 3)	1 г	1	ADDI-	i f		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		. =		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	115				
							L	+145=		OR	+290=	
						•	Α	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
T	\ .	(Column 1) CLAIMS		(Columi		(Column 3)	۰ ـــ			_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
WE	Independent	*	Minus	***		=		X43=			X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	A43-		OR	×00=	
* If the entry in column 1 is less than the ontry in column 2 write "0" in column 2										OR	+290=	
** If	the "Highest Nun	nber Previously Pai	d For" IN THIS	SPACE is I	ess than	20. enter "20."	AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												